



Return to work with aphasia

review of the literature and preliminary vocational outcome of an intensive rehabilitation programme

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Publication date:
2009

Document version
Publisher's PDF, also known as Version of record

Citation for published version (APA):
Jensen, L. R., & Lønnberg, C. (2009). *Return to work with aphasia: review of the literature and preliminary vocational outcome of an intensive rehabilitation programme*. Abstract from 2nd Nordic Aphasia Conference, København, Denmark.

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Approximately 20-25 % of all stroke victims are below the age of 65. For persons with aphasia who were gainfully employed at the time of their stroke, return to some form of work may be an important goal of the rehabilitation process.

General societal conditions such as social legislation, economic conditions and the state of the labour market are likely to influence the success rate of return to work in persons with disabilities, such as stroke victims (Radford & Walker, 2008; Ramsing, Blomstrand, & Sullivan, 1991). Specific studies of return to work in persons with aphasia are few, and meaningful conclusions cannot always be drawn about rate of success in return to work for persons with aphasia (Caporali & Basso, 2003). In general studies of return to work after stroke, aphasic persons are not always treated separately in the analyses (Wozniak, 2002). When they are, however, there are indications, that aphasia influences return to work negatively (Black-Schaffer & Osberg, 1990)

The literature on the challenges faced in the vocational rehabilitation process of persons with aphasia is also limited (Garcia, Barrette, & Laroche, 2000; Lasker, LaPointe, & Kodras, 2005). Studies of factors influencing the process indicate that aphasia severity is not the most important issue (Caporali & Basso, 2003; J. J. Hinckley, 1998; Penn, 2000). Other factors such as work place flexibility, social support and motivation seem to be of greater importance for enabling the person with aphasia to return to a former job with modified tasks or to face the challenge of entering and successfully completing vocational trial and placement (Garcia, et al., 2000; J. Hinckley, 2002).

Two years ago Centre for Rehabilitation of Brain Injury in Copenhagen initiated a holistic rehabilitation programme for working-age persons with aphasia. The programme combines intensive training of language and communication with social and vocational rehabilitation, and consists of 4 months with 20 hour weekly training followed by an 8month follow-up period with work trial or vocational placement. Vocational outcome for 16 persons with moderate to severe aphasia is presented and observations and experiences concerning the vocational rehabilitation process of persons with aphasia are summarized. Preliminary results are in accordance with studies, which find that severity of aphasia is not a crucial factor in return to work.

The general insight is that persons with moderate or severe aphasia may successfully re-enter some form of paid and partially subsidized employment, but they need an extended period of rehabilitation compared to other stroke victims without aphasia. The rehabilitation team needs to take an active part in identifying and locating relevant jobs for work trial. They must partake in the process of adjusting tasks and expectations together with the person with aphasia and the employer. Some of the important aspects of success appear to be: Insight and adjustment to communication problems, which emerge during the period of intensive language therapy, weekly sessions clarifying options and choices, and a therapeutic milieu enabling the person with aphasia to sustain or develop the courage and motivation to take an active part in life and be willing to meet new challenges.

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